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CONFIRMATION NO. 7255

<b>SERIAL NUMBER</b> 09/653,924	<b>FILING OR 371(c) DATE</b> 09/01/2000 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1644	<b>ATTORNEY DOCKET NO.</b> A-67689-3/RFT/RMS/RMK
<b>APPLICANTS</b> David A. Horwitz, Santa Monica, CA;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/151,987 09/01/1999 which is a CON of 09/261,890 03/03/1999 PAT 6,447,765 which claims benefit of 60/076,677 03/03/1998				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 10/31/2000				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 17	<b>TOTAL CLAIMS</b> 28
				<b>INDEPENDENT CLAIMS</b> 5
<b>ADDRESS</b> Robin M Silva DORSEY & WHITNEY LLP Four Embarcadero Center Suite 3400 San Francisco ,CA 94111-4187				
<b>TITLE</b> USE OF CYTOKINES, CELLS AND MITOGENS TO INHIBIT GRAFT VERSUS HOST DISEASE				
<b>FILING FEE RECEIVED</b> 860	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	